

STATE OF NEVADA
COMMISSION ON MINERAL RESOURCES
DIVISION OF MINERALS
400 W. King Street, Suite 106
Carson City, Nevada 89703
(775) 684-7040 | Fax (775) 684-7052

**OIL, GAS, AND GEOTHERMAL
SUNDRY NOTICE AND REPORT ON WELLS**

- | | |
|---|---|
| <input type="checkbox"/> Notice of Intention of Change in Drilling Plans
<input type="checkbox"/> Notice of Intention to Reopen or Repair Well
<input type="checkbox"/> Notice of Intention to Stimulate Well
<input type="checkbox"/> Notice of Intention to Pull or Alter Casing
<input type="checkbox"/> Notice of Intention to Abandon Well
<input type="checkbox"/> Notice of Exception to Sample Water | <input type="checkbox"/> Subsequent Report of Fracture Treatment
<input type="checkbox"/> Subsequent Report of Reopening or Repair
<input type="checkbox"/> Subsequent Report of Stimulation
<input type="checkbox"/> Subsequent Report of Altering Casing
<input type="checkbox"/> Supplementary Well History
<input type="checkbox"/> Notice of Intention to Fracture Treat Formation(s)
<input type="checkbox"/> Other () |
|---|---|

(Indicate above by check mark, nature of report, notice or other data.)

Permit Number	
Well No.	
County	
Company Name	
Field or Area	
Farm or Lease	
Date	

SUMMARY OF WORK

(State names of and expected depths to objective zones or formations: show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and ALL other pertinent data.) Attachments permitted if necessary.

I understand that this plan of work must receive approval in writing of the Division of Minerals before operations may be commenced.

Company _____
Address _____

Name _____
Position _____
Signature _____

REMARKS:

This sundry notice is valid for up to one (1) year from the date of approval, unless otherwise stated.

DO NOT WRITE IN THE SPACE BELOW

Approved by _____
Position _____
Date _____